Form 9-331 (May 1963)

UNIT'L STATES SUBMIT IN TRIPLICA. DEPARTMENT OF THE INTERIOR (Other instructions on reverse side)

NOTICE OF INTENTION TO:

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

Form approved. Budget Bureau No. 42-R1424.

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5. LEASE	DESIGN	ATION	AND	SERI	ΑL	NO.
LC	Λ	59	7 1	8	1	

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

SUBSEQUENT REPORT OF:

	GEOLOGICAL SURVEY	LC 059001
	JNDRY NOTICES AND REPORTS ON WELLS this form for proposals to drill or to deepen or plug back to a different reservoir Use "APPLICATION FOR PERMIT—" for such proposals.)	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
OIL GAS	LL OTHER	7. UNIT AGREEMENT NAME
2. NAME OF OPERATO	ental Oil Company	8. FARM OR LEASE NAME 70CA Unit LT/
3. Address of oper Box 46	O Hobbs, New Mexico 88240	9. WELL NO. 22/
See also space 17 At surface	(Report location clearly and in accordance with any State requirements.* Low. Low.	10. FIELD AND POOL, OR WILDCAT Mcli G-SA Rypiem 11. SEC., T./R., M., OR BLK. AND SURVEY OR AREA 5ec 33 7-175 R-32E
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.)	12. COUNTY OF PARISH 13. STATE
16.	Check Appropriate Box To Indicate Nature of Notice, Repor	t, or Other Data

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.) It is proposed to temporarily abondon this well by the following procedures: Set coment wisiner of 2710'. Pump in 300 Socks lete weight coment of 2710'. Pump in 300 Socks lete weight Coment Set they at 12-50' and set a 40 Sock Class H. Set they followed from 1250'-850'. 17. DESCRIBE PROPOSED OF COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones perti-

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SIGNED Clarate	he toregoing is true and corre	Admin Admin	istrative Supervise	T ALTE 7-3-72
(This space for Federa	al or State office use)		30VI	*//
APPROVED BY		TITLE	1972/	9/1/5
,	•		JUL 6 BROY	N. C.
USGS (5) FI	LE $McA(3)$	*See Instructions	on Reverse Side ANTHUR R. BROWNE	ik
/			ANDISTRIC.	

RECUVED

0.1 Construction Count.